

PRESS RELEASE

Congressman John Conyers, Jr.

**Fourteenth District, Michigan
Ranking Member, Committee on the Judiciary
Dean, Congressional Black Caucus**

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CONYERS AND BARR INTRODUCE **“THE HEALTH CARE IMPROVEMENTS ACT OF 2002”**

Today, Congressman John Conyers, Jr., Ranking Member of the House Judiciary Committee and Congressman Bob Barr joined Congressman Joseph Hoeffel, Congressman Greg Ganske, representatives from the American Medical Association, the National Medical Association and other healthcare professional and trade organizations in a press conference to introduce the Healthcare Antitrust Improvements Act of 2002.

_____ Conyers issued the following statement on the legislation:

“I am pleased to introduce, along with Congressman Barr, the Health Care Improvement Act of 2002. This is the successor legislation to the Campbell/Conyers bill from last Congress, which passed the House by an overwhelming 276-136 vote. We have drafted a more narrow legislative response this Congress in the hope that the bill will be more likely to move in the Senate.

The legislation responds to two alarming anti-consumer trends – the ever increasing level of concentration among health insurers and exclusionary contracting practices by health insurance companies. The last five years have seen a massive consolidation in the health insurance and managed care market as more than a dozen health insurance competitors have been eliminated through mergers and acquisitions.

The dangers posed by this ever increasing market concentration are exacerbated by the practice of health insurers engaging in heavy-handed negotiating tactics and requiring exclusionary contractual commitments from health care providers. Such restrictive contractual terms are frequently proffered on a “take it or leave it” basis to health care providers, under the threat of the loss of the provider’s patients or exclusion from their access to other patients.

Our legislation responds to the problem by allowing physicians or other health care professional to collectively negotiate with a health plan over contractual terms or plan policies. Presently, joint negotiations with a health plan by physicians or other health care professionals who are not financially integrated are illegal per se under the federal antitrust laws if they involve fees or prices. Under this legislation, such activities would be subject to review based on a more liberal “rule of reason” analysis, which could take quality of health care into account.

I have taken a particular interest in this legislation because of the unfairness of the current market situation on African American doctors. I am aware of a number of incidents in Detroit and around the country of minority physicians being threatened that they will lose all of their business unless they enter into one-sided service contracts. This bill gives physicians the ability to respond to these abuses on a collective basis.

The legislation is strongly supported by a wide array of health care professional and trade organizations, including several speaking today.”